



PHILIP L. BROWNING  
Director

**County of Los Angeles  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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September 27, 2015

To: Supervisor Michael D. Antonovich, Mayor  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe

Board of Supervisors  
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From: Philip L. Browning  
Director

**T&T HOME FOR BOYS GROUP HOME COMPLIANCE MONITORING REVIEW**

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a contract compliance review of T&T Home for Boys Group Home (the Group Home) in November 2014. The Group Home has one site located in the Second Supervisorial District and provides services to the County of Los Angeles DCFS placed children and probation youth. According to the Group Home's program statement, its purpose is "to provide comprehensive behavior and social adjustment services to its adolescent males who experience emotional disturbance, physical abuse, poor social adjustment, behavioral problems and learning disabilities."

The Group Home is licensed to serve a capacity of six males, ages 12 through 17. At the time of the review, the Group Home served five placed DCFS children. The placed children's overall average length of placement was 8 months, and the average age was 17.

**SUMMARY**

During CAD's contract compliance review, the interviewed children generally reported: feeling safe at the Group Home; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity.

The Group Home was in full compliance with 5 of 10 areas of our Contract Compliance Review: Facility and Environment; Education and Workforce Readiness; Personal Rights and Social/Emotional Well-Being; and Discharged Children.

The Psychotropic Medications section was not applicable, since no placed children were prescribed psychotropic medication at the time of the review.

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to not maintaining detailed sign-in/sign-out logs; Maintenance of Required Documentation and Service Delivery, related to not obtaining the County Children Social Worker's (CSW) authorization to implement the Needs and Services Plan (NSP), not maintaining documentation of the CSW

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monthly contacts and not developing timely and comprehensive initial NSPs; Health and Medical Needs, related to untimely follow-up dental examinations; Personal Needs/Survival and Economic Well-Being, related to not allowing children to participate in the selection of their clothing; and Personnel Records, related to an incomplete criminal background statement, education requirements not being met; a facility manager not having a record of the required Facility Manager training, untimely health screenings and tuberculosis (TB) tests, employee not signing copies of the Group Home's policies and procedures and an employee not completing all required training.

### **REVIEW OF REPORT**

On December 2, 2014, Jennifer Higuchi, DCFS CAD held an Exit Conference with Jimmie Theragood, Group Home Administrator, and William Zachary, Facility Manager. DCFS staff included: Sonya Noil, Out-of-Home Care Management Division (OHCMD). The Group Home representatives were in agreement with the review findings and recommendations, were receptive to implementing systematic changes to improve their compliance with regulatory standards, and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the Auditor-Controller and Community Care Licensing Division.

The Group Home provided the attached approved CAP addressing the recommendations noted in this report.

The OHCMD provided technical assistance to the Group Home on January 2, 2015, to assist with implementation of the CAP. CAD conducted a follow-up visit on March 31, 2015 and verified implementation of the CAP.

If you have any questions, your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM  
LTI:jh

#### **Attachments**

c: Sachi A. Hamai, Interim Chief Executive Officer  
John Naimo, Auditor-Controller  
Jerry E. Powers, Chief Probation Officer  
Public Information Office  
Audit Committee  
Sybil Brand Commission  
Jimmie Theragood, Administrator, T&T Home for Boys  
Lenora Scott, Regional Manager, Community Care Licensing Division  
Lajuannah Hills, Regional Manager, Community Care Licensing Division

**T&T HOME FOR BOYS GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

19504 Tillman Avenue  
Carson, CA 90746  
License No: 191600883  
Rate Classification Level: 8

	<b>Contract Compliance Monitoring Review</b>	<b>Findings: November 2014</b>
I	<b><u>Licensure/Contract Requirements</u></b> (9 Elements) <ol style="list-style-type: none"> <li>1. Timely Notification for Child's Relocation</li> <li>2. Transportation Needs Met</li> <li>3. Vehicle Maintained In Good Repair</li> <li>4. Timely, Cross-Reported SIRs</li> <li>5. Disaster Drills Conducted &amp; Logs Maintained</li> <li>6. Runaway Procedures</li> <li>7. Comprehensive Monetary and Clothing Allowance Logs Maintained</li> <li>8. Detailed Sign-In/Out Logs for Placed Children</li> <li>9. CCL Complaints on Safety/Plant Deficiencies</li> </ol>	<ol style="list-style-type: none"> <li>1. Non-Applicable</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Non-Applicable</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Improvement Needed</li> <li>9. Full Compliance</li> </ol>
II	<b><u>Facility and Environment</u></b> (5 Elements) <ol style="list-style-type: none"> <li>1. Exterior Well Maintained</li> <li>2. Common Areas Well Maintained</li> <li>3. Children's Bedrooms Well Maintained</li> <li>4. Sufficient Recreational Equipment/Educational Resources</li> <li>5. Adequate Perishable and Non-Perishable Foods</li> </ol>	Full Compliance (All)
III	<b><u>Maintenance of Required Documentation/Service Delivery</u></b> (10 Elements) <ol style="list-style-type: none"> <li>1. Child Population Consistent with Capacity and Program Statement</li> <li>2. County Children's Social Worker's Authorization to Implement NSPs</li> <li>3. NSPs Implemented and Discussed with Staff</li> <li>4. Children Progressing Toward Meeting NSP Case Goals</li> <li>5. Therapeutic Services Received</li> <li>6. Recommended Assessment/Evaluations Implemented</li> <li>7. County Children's Social Workers Monthly Contacts Documented</li> <li>8. Children Assisted in Maintaining Important Relationships</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Improvement Needed</li> <li>8. Full Compliance</li> </ol>

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	9. Development of Timely, Comprehensive Initial NSPs with Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	9. Improvement Needed 10. Improvement Needed
IV	<b><u>Education and Workforce Readiness</u></b> (5 Elements) 1. Children Enrolled in School Within Three School Days 2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals 3. Current Report Cards/Progress Reports Maintained 4. Children's Academic or Attendance Increased 5. GH Encouraged Children's Participation in YDS or Equivalent Services and Vocational Programs	Full Compliance (All)
V	<b><u>Health and Medical Needs</u></b> (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed
VI	<b><u>Psychotropic Medication</u></b> (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Not Applicable
VII	<b><u>Personal Rights and Social/Emotional Well-Being</u></b> (13 Elements) 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Appropriate Staffing and Supervision 4. GH's Efforts to provide Nutritious Meals and Snacks 5. Staff Treat Children with Respect and Dignity 6. Appropriate Rewards and Discipline System 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend or Not Attend Religious Services/Activities 9. Children's Chores Reasonable 10. Children Informed About Their Medication and Right to Refuse Medication	Full Compliance (All)

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	11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 12. Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) 13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)	
VIII	<b><u>Personal Needs/Survival and Economic Well-Being</u></b> (7 Elements) <ol style="list-style-type: none"> <li>\$50 Clothing Allowance</li> <li>Adequate Quantity and Quality of Clothing Inventory</li> <li>Children's Involvement in Selection of Their Clothing</li> <li>Provision of Clean Towels and Adequate Ethnic Personal Care Items</li> <li>Minimum Monetary Allowances</li> <li>Management of Allowance/Earnings</li> <li>Encouragement and Assistance with Life Book/Photo Album</li> </ol>	<ol style="list-style-type: none"> <li>Full Compliance</li> <li>Full Compliance</li> <li>Improvement Needed</li> <li>Full Compliance</li> <li>Full Compliance</li> <li>Full Compliance</li> <li>Full Compliance</li> </ol>
IX	<b><u>Discharged Children</u></b> (3 Elements) <ol style="list-style-type: none"> <li>Children Discharged According to Permanency Plan</li> <li>Children Made Progress Toward NSP Goals</li> <li>Attempts to Stabilize Children's Placement</li> </ol>	Full Compliance (All)
X	<b><u>Personnel Records</u></b> (7 Elements) <ol style="list-style-type: none"> <li>DOJ, FBI, and CACIs Submitted Timely</li> <li>Signed Criminal Background Statement Timely</li> <li>Education/Experience Requirement</li> <li>Employee Health Screening/TB Clearances Timely</li> <li>Valid Driver's License</li> <li>Signed Copies of Group Home Policies and Procedures</li> <li>All Required Training</li> </ol>	<ol style="list-style-type: none"> <li>Full Compliance</li> <li>Improvement Needed</li> <li>Improvement Needed</li> <li>Improvement Needed</li> <li>Full Compliance</li> <li>Improvement Needed</li> <li>Improvement Needed</li> </ol>

**T&T HOME FOR BOYS GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW  
FISCAL YEAR 2014-2015**

**SCOPE OF REVIEW**

The following report is based on a “point in time” monitoring visit. This compliance report addresses findings noted during the November 2014 review. The purpose of this review was to assess T&T Home for Boys Inc., Group Home’s (the Group Home’s) compliance with its County contract and State regulations and included a review of the Group Home’s program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 10 areas:

- Licensure/Contract Requirements,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, four Department of Children and Family Services (DCFS) placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, three discharged children’s files were reviewed to assess the Group Home’s compliance with permanency efforts. At the time of the review, none of the placed children were prescribed psychotropic medication.

CAD reviewed five staff files for compliance with Title 22 regulations and County contract requirements, and conducted a site visit to assess the provision of quality of care and supervision.

**CONTRACTUAL COMPLIANCE**

CAD found the following areas out of compliance:

**Licensure/Contract Requirements**

- Detailed sign-in/sign-out logs for placed children were not maintained.

The Group Home’s sign-in/sign-out logs did not require visitors to identify their relationship with the child and did not consistently document the destination of the outings.

The Group Home representative notified CAD that they would modify the sign-in/sign-out logs to include information about the child’s destination, time of return, name and telephone number of the person responsible during outings/visits, and the relationship of the adult to the child.

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During the follow-up visit on March 31, 2015, CAD confirmed that a new sign-in/sign-out protocol was implemented.

**Recommendation:**

The Group Home's management shall ensure that:

1. Detailed sign-in/sign-out logs are maintained.

**Maintenance of Required Documentation and Service Delivery**

- County Children's Social Worker's (CSW) authorization to implement Needs and Services Plans (NSPs) was not obtained.

The Group Home did not obtain CSW signatures for five of eight NSPs reviewed. The Group Home representative informed CAD that they had difficulty obtaining CSW's signatures since they do not always conduct their monthly visits with the children in the Group Home. There have been instances where the Group Home staff has personally delivered the NSP to the CSW's office to obtain their signatures. CAD informed the Group Home that they may fax the NSPs to the CSWs and document the Group Home's efforts.

On March 31, 2015, CAD reviewed three of the most current NSPs and ensured that the CSW's signatures were obtained.

- CSW's monthly contacts were not documented.

The Group Home representatives stated that they were not aware they could make contact with the CSW by telephone or email. It was their understanding that the contacts needed to be in-person. The Group Home representatives stated that they will maintain monthly email communication with the CSWs.

On March 31, 2015, CAD reviewed email print-outs, which documented the monthly communication between the Group Home staff and the CSW.

- Timely, comprehensive, initial NSPs with child's participation were not developed.

The Group Home did not develop comprehensive and timely initial NSPs for three of the four sampled children. The NSPs had pre-printed dates and timeliness could not be determined.

- Timely, comprehensive, updated NSPs with child's participation were not developed.

The Group Home did not develop comprehensive and timely updated NSPs for two of the two updated NSPs reviewed. Both updated NSPs were late by seven days.

During the review, CAD met with the Group Home's social worker to discuss the importance of the development of timely and appropriate and measurable NSP goals for the children.

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On March 31, 2015, CAD reviewed the three most current NSPs to ensure that they were being completed on time, and contained appropriate and measureable goals.

**Recommendations:**

The Group Home's management shall ensure that:

2. County CSW's authorization to implement the NSP is obtained.
3. County CSW monthly contacts are documented.
4. Develop timely, comprehensive, initial NSPs with child's participation.
5. Develop timely, comprehensive, updated NSPs with child's participation.

**Health and Medical Needs**

- A follow-up dental exam was not conducted timely.

The Group Home did not provide a follow-up dental examination for one of four sampled children. The dentist recommended that the child return in August 2014 for follow-up treatment. As of November 2014, the child had not been seen by the dentist.

The Group Home representative stated that the child described above was placed in July 2014 and the Group Home was not aware that the dentist wanted the child to return in four weeks for follow-up care. The Group Home assumed that the child needed to return in six months.

On March 31, 2015, CAD reviewed the child's file and confirmed that the child was seen by the dentist on February 10, 2015.

**Recommendation:**

The Group Home's management shall ensure that:

6. Timely follow-up dental exams are conducted.

**Personal Needs/Survival and Economic Well-Being**

- Children were not involved in the selection of their clothing.

A 16-year old child stated that he is only allowed to shop at a particular store that is approved by the Group Home. He stated that he would like to have more options to purchase his clothing.

The Group Home representative stated that they were previously cited for taking the children to the swap meet as the receipts did not contain the needed information such as date, description of item, and store name. Therefore, the agency created an account with Sears to be able to provide appropriate receipts to DCFS. The Group Home representative stated that they would allow the children to shop at various stores to meet their needs.



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On March 31, 2015, CAD reviewed the clothing receipts to confirm that the children were allowed to purchase clothing from a variety of stores.

**Recommendation:**

The Group Home's management shall ensure that:

7. Children are involved in the selection of their clothing.

**Personnel Records**

- Criminal background statement was not signed timely.

A child care worker hired in June 2014 did not have a signed criminal background statement on file at the time of the review. Immediately after the Exit Conference was held on December 2, 2014, the Group Home submitted a copy of the signed form to CAD.

- Education/Experience requirements were not met.

A facility manager did not complete the mandated one-hour facility manager specific training. Immediately after the Exit Conference was held on December 2, 2014, the Group Home submitted a copy of the completed training to CAD.

- Employee health screening/tuberculosis (TB) clearance was not timely.

The same child care worker hired in June 2014 did not complete the health screening and TB test until November 21, 2014.

On March 31, 2014, CAD verified that the aforementioned staff completed the health screening on January 21, 2015.

- Signed copies of Group Home policies and procedures were not maintained.

The same child care worker did not have signed copies of the Group Home's policies and procedures. On January 13, 2015, the Group Home submitted signed copies of the documents to remain in compliance.

- Staff did not complete all required training.

A child care worker who was hired in January 2010 did not have documentation of completing the mandated one-hour child abuse reporting training. The Group Home submitted documentation on January 13, 2015, that the child care worker completed the training on June 5, 2014.

**Recommendations:**

The Group Home's management shall ensure that:

8. Signed criminal background statements are completed timely.
9. Employees meet the education/experience requirements.
10. Employees complete health screening/TB clearances timely.
11. Signed copies of Group Home's policies and procedures are maintained.
12. All required staff training is completed.

**PRIOR YEAR FOLLOW-UP FROM DCFS OHCMD'S GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The OHCMD's last compliance report dated May 12, 2014, identified six recommendations.

**Results**

Based on CAD's follow-up, the Group Home implemented three of six recommendations for which they were to ensure that:

- The Group Home's vehicle is properly maintained and in good repair.
- The common quarters are well maintained.
- All children's bedrooms are well maintained.

Based on the results of the current review, three recommendations were not implemented.

- DCFS County social workers are contacted monthly by the Group Home and the contacts are documented in the children's case files.
- Comprehensive initial NSPs are to be developed and include all of the elements in accordance with the NSP template.
- Comprehensive updated NSPs are to be developed and include all of the elements in accordance with the NSP template.

**Recommendation:**

13. The outstanding recommendations from the monitoring report dated May 12, 2014, noted in this report as Recommendations number 3, 4, and 5 are fully implemented.

The Group Home representatives expressed their desire to remain in compliance with Title 22 regulations and contract requirements. The Group Home will implement procedures to strive towards greater compliance.

CAD conducted a follow-up visit on March 31, 2015 and determined that the Group Home had implemented 12 of 12 recommendations. CAD will continue to assess implementation of the recommendations during our next monitoring review. The OCHMD will provide on-going technical assistance prior to the next review.

**MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER (A-C)**

A fiscal review of the Group Home has not been posted by the A-C.

# T & T Home for Boys

19504 TILLMAN AVENUE

CARSON, CA 90746

January 5, 2015

Ali Bhatti – DCFS Manager

RE: Written Formal Correction Action Plan (CAP) regarding the deficiencies cited on the group home monitoring review field exit summary dated 12/02/2014.

**I. LICENSE/CONTRACT REQUIREMENTS**

#8. Does the facility maintain a detailed sign in/out log for placed children? (SAFETY)

**T & T Home for Boys Corrective Action Plan**

The agency has created a new sign in/out log which includes sufficient destination information; anticipated time of return; name and telephone number of the person who is responsible for the resident while he is away from the facility. T & T Home for Boys has also created a daily log that will clearly identify the relationship between the child and the visitor.

**Person(s) Responsible for Implementation of the CAP**

The facility manager [REDACTED] or designee is responsible for ensuring that the daily logs are completed correctly.

**Time Frame of Implementation**

Immediately

**III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY**

#16. Did the group home obtain or document efforts the County Worker's authorization to implement the Needs and Services Plan? (WELL-BEING)

**T & T Home for Boys Corrective Action Plan****Person(s) Responsible for Implementation of the CAP**

- Effective immediately, facility Social Worker [REDACTED] will submit comprehensive NSP to Facility Manager, [REDACTED] one week prior to due date.
- Upon submission, Social Worker will review NSP with resident and ensure signatures are received from resident and facility manager representative on NSP's.
- Facility Manager will then fax or email NSP's to the appropriate CSW for final signature and review.

#21. Are County Workers contacted monthly by the GH and are the contracts appropriately documented in the case file? (WELL-BEING)

**T & T Home for Boys Corrective Action Plan**

- Effective immediately, Facility Manager will develop a log to track monthly contacts with CSW to include topic of discussion on each resident.
- Social Worker will review contact log monthly and include contact dates on each resident's NSP.

#23. Did the treatment team develop timely comprehensive, initial Needs and Services Plans (NSP) with the participation of the developmentally age appropriate child? (WELL BEING)

**T & T Home for Boys Corrective Action Plan**

- Effective immediately, facility Social Worker will submit comprehensive initial NSP to Facility Manager, [REDACTED] on week prior to due date.
- Upon submission, Social Worker will review NSP with resident and ensure signatures are received from each resident on all NSP's.

#24. Did the treatment team develop timely comprehensive, updated Needs and Services Plans (NSP) with the participation of the developmentally age appropriate child? (WELL BEING)

**T & T Home for Boys Corrective Action Plan**

- Effective immediately, facility Social Worker will submit comprehensive updated NSP to Facility Manager, [REDACTED] on week prior to due date.
- Upon submission, Social Worker will review NSP with resident and ensure signatures are received from each resident on all NSP's.

**V. HEALTH AND MEDICAL NEEDS**

#33. Are required follow-up dental examinations conducted timely? (WELL BEING)

**T & T Home for Boys Corrective Action Plan**

**Person(s) Responsible for Implementation of the CAP**

In efforts to ensure that all medical and dental examinations are conducted timely – T & T Home for Boys has designated child care worker and transportation driver Mr. John Smith to be responsible for transporting all residents to their medical and dental examinations as scheduled.

**Time Frame of Implementation**

Immediately

**VIII. PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL BEING**

#51. Are children, appropriate to their developmental level involved in the selection of their clothing? (Self Sufficiency)

**T & T Home for Boys Corrective Action Plan**

Group Home will allow residents to shop at a variety of stores as needed in order to meet their clothing needs.

**Person(s) Responsible for Implementation of the CAP**

The transportation child care worker [REDACTED] is responsible for taking residents shopping monthly. His duties will include taking the residents to a variety of stores to ensure that they may select age appropriate clothing.

**Time Frame of Implementation**

Immediately

**X. PERSONNEL RECORDS**

#60. Did appropriate employees sign a criminal background statement in a timely manner?

(Safety)

**T & T Home for Boys Corrective Action Plan**

The administrator [REDACTED] is responsible for ensuring that each employee sign a criminal background statement prior to employment. The criminal background statement will remain in the employee file throughout the duration of their employment

**Time Frame of Implementation**

Immediately

#61. Do GH staff who have direct contact with children meet educational/ experience requirements? (Safety)

**T & T Home for Boys Corrective Action Plan**

The administrator [REDACTED] will be responsible for all personnel records. Proper documentation of all employees training will be placed and kept in the employees file. The facility manager [REDACTED] documentation of training was faxed over to Ms. Jennifer Higuchi, MSW.

**Time Frame of Implementation**

Immediately

#62. Have employees received timely health screening/ TB clearance? (Safety)

**T & T Home for Boys Corrective Action Plan**

In efforts to ensure that employees receive timely health screening/ TB clearances the administrator [REDACTED] will check the employee's personnel files weekly. Health screen forms and TB clearances faxed over to [REDACTED]. No T&T Home for Boys employee can start employment until these forms are completed and placed in their personnel files.

**Time Frame of Implementation**

Immediately

#64. Have Appropriate GH Employees signed copies of the GH Policies and Procedures? (Safety)

T & T Home for Boys Corrective Action Plan

The administrator [REDACTED] has secured the signature of all employees. The administrator will check the personnel files periodically to ensure all required forms are signed. Policies and procedure forms will be signed by each employees prior to hire.

Time Frame of Implementation

Immediately

#65. Have Appropriate employees received all required training (Initial, minimum of one- hour child abuse reporting, CPR, First-Aid, required annual and emergency intervention)? (Safety)

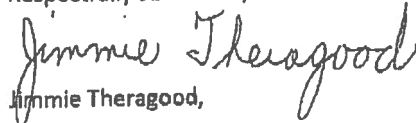
T & T Home for Boys Corrective Action Plan

The administrator [REDACTED] or facility manager [REDACTED] is responsible for ensuring that all of the T&T Home for Boys employees receive the required training in the area of child abuse reporting, CPR, First- Aid and emergency intervention. The administrator [REDACTED] will check monthly to ensure all required training is up to date.

Time Frame of Implementation

Immediately

Respectfully submitted,



Jimmie Theragood,

Administrator